

## HURRICANE KATRINA DATA INFORMATION SHEET

Type Orders Needed	"X"	TYPE	Appropriation Code ( 1 – 7 )
		Military TDY (1320/16)	
		Civilian Employee (1610)	
		Civilian Dependent (Cert)	
		Military Dependent (Cert)	
Last, First, MI			
Grade/Rank/Rate (i.e., LCDR/04)			
Sponsors Rank letter designator			
SSN			
Branch (determines appropriation) (Circle one)	USN	USNR	HOUSING
GOVCC Holder (Circle one)	YES	NO	
Civilian Position Title and Grade/Rating			
Command assigned			
UIC			
Location of command (Circle one)	Pascagoula	Gulfport	New Orleans
Safe Haven Location			
Phone number where you can be reached:			
Email address where orders can be sent			
Fax number where orders can be sent			
MMPA has been verified (PSA) (Circle one)	YES	NO	
DCPS has been verified (CNISC) (Circle one)	YES	NO	
<b>DEPENDENT INFORMATION</b>			
Name (last, First, MI)	SSN	Relationship	DOB

Data Sheet prepared by:	DSN Phone:	Email Address:
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**FOR CNISC USE ONLY**

TANGO NO.